

EXHIBIT E

Montvale Surgical Center

6 Chestnut Ridge Rd
Montvale, NJ 07645
201-391-4700
Tax ID 260463867

2nd LEVEL APPEAL

November 30, 2010

Horizon
PO Box 1770
Newark, NJ 07101

Patient Name: [REDACTED]
Patient ID #: [REDACTED]
Date of Service: 03/08/2010

To whom it may concern:

In regards to the above named patient we are appealing your decision to allow \$459.00 for date of service 03/08/2010, claim #20102370568300. We are a non-participating ambulatory surgery center and are not held to fee schedules. Please note there are no limitations indicated in the patient's plan description that would limit an ASC reimbursement.

Non-participating provider charges are reimbursed based on R&C (Reasonable & Customary) fees determined by our geographic location. Horizon's allowance of \$459.00 was considerably less than R&C.

Finally, we request on behalf of our patient a copy of the Summary Plan Description ("SPD") required to be maintained by the Plan and provided upon request to the Plan Beneficiary under ERISA. Please note, an enrollee/beneficiary may file suit against a Plan Administrator who fails to comply with the enrollee's/beneficiary's request for a copy of the latest SPD. Indeed, Section 502(a)(1)(A) of ERISA indicates the Plan Administrator has thirty (30) days to provide the SPD to the enrollee/beneficiary. The Plan Administrator may be held liable for up to \$110.00 per day for each day it fails to provide the SPD to the enrollee/beneficiary.

We believe we can come to an agreement for a fair reimbursement and to avoid pursuing civil action.

Thank you for your consideration.

Regards,

Maggie Cuello
Billing Manager